

My diabetes, my care

Easy read report

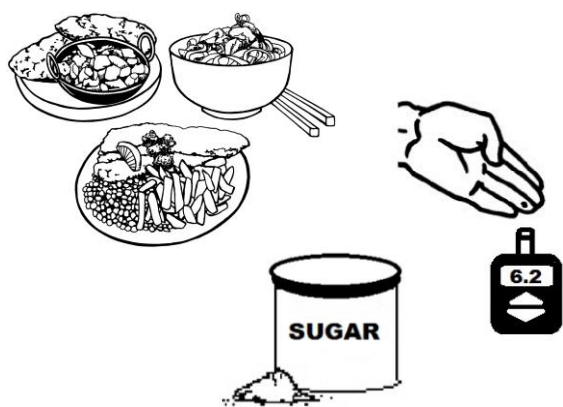
(September 2016)



This is an easy read version of the report called 'My diabetes, my care'. It looks at what happened to people who had care and support in the community to help them look after their diabetes.

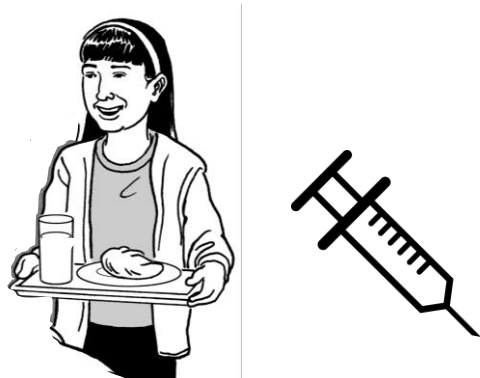
It is written by the Care Quality Commission (CQC). We check services like hospitals, doctors' surgeries and care homes to make sure they are giving good health and social care to people.

What is diabetes?

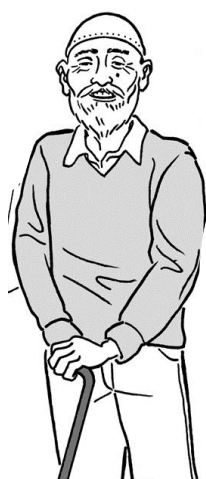


Diabetes is an illness where your blood gets too much sugar from the food you eat.

There are 2 types of diabetes:



People usually get **Type 1 diabetes** before they are 40 years old, and they have to give themselves medicine by injection every day.



People with **Type 2 diabetes** usually get it after they are 40 years old. Most people (9 out of 10 people) who have diabetes have Type 2 diabetes.

What does this report mean for you?

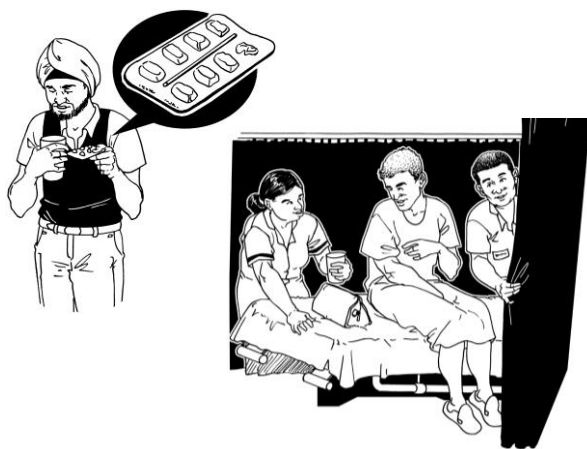
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In the last 20 years, the number of adults in England with diabetes has doubled.



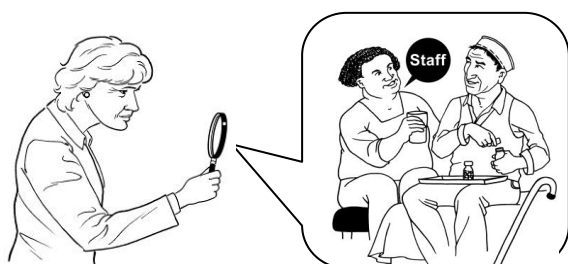
Having diabetes affects people's health and how they look after themselves. Some people may get a heart illness, stroke (when the brain doesn't get enough oxygen) or need a part of their body removed in an operation.



It is very important for people with diabetes to receive good care and support to look after their health.



CQC wanted to understand more about what happened to the care of people with diabetes in England. So we looked at how care services work to give good diabetes care.

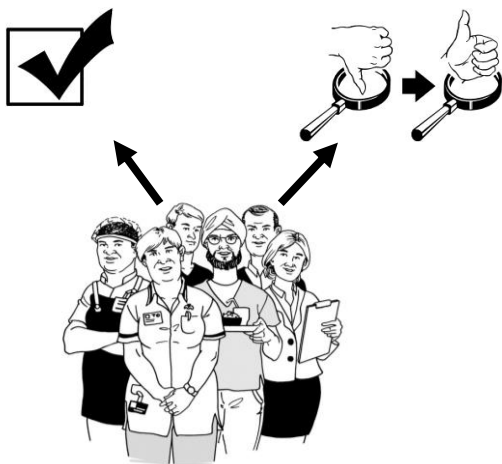




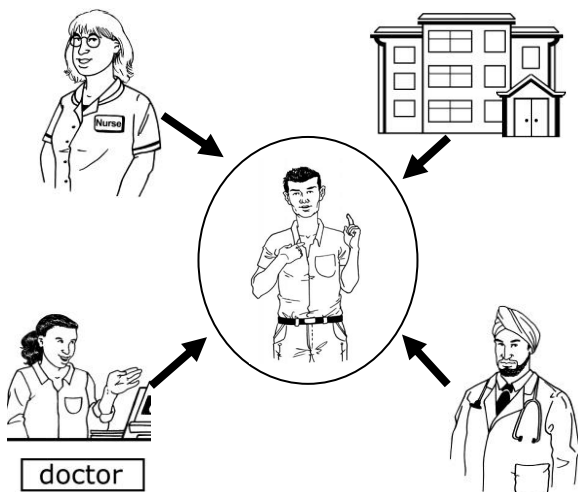
We asked people aged 18 to 65 who have Type 1 or Type 2 diabetes to tell us about what happened when they received care.



We also spoke to commissioners (organisations that look after the care of people), services and staff in 10 different locations about how they give diabetes care in the community.

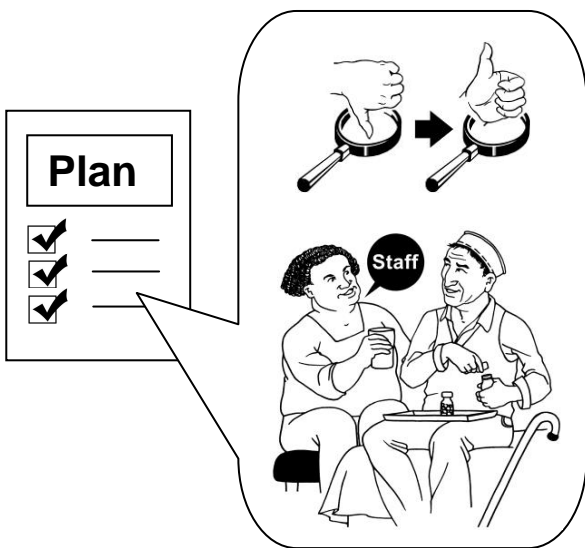


Although many areas are doing a good job, there are still some things that can be improved to make sure everyone has the same good care.



Services must work together to make sure the person with diabetes is at the centre of their care.

What did we find?



1. Most people we spoke to had checks to make sure things will not get difficult for them later on.

People felt they could talk about their care with staff and have their care explained to them in a way they could understand.

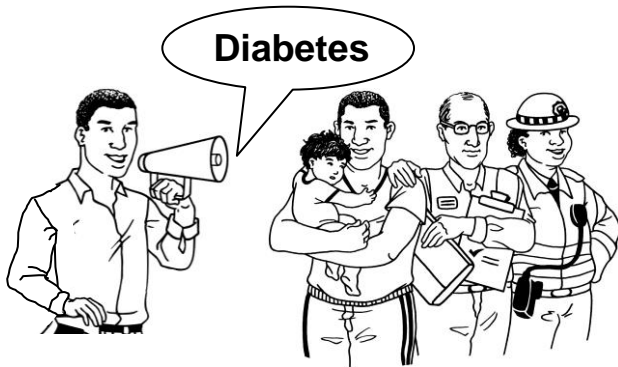
But some people said the care they received could not always be changed to meet their needs.

We said services should have a local plan to improve diabetes care through supporting people to look after their diabetes in a way that best meets their needs.



2. People who were more likely to have Type 2 diabetes were not always found early enough or helped to stop them from getting diabetes.

We said commissioners and services need to make their whole community aware of and understand what diabetes is, and to ask people to have health checks.

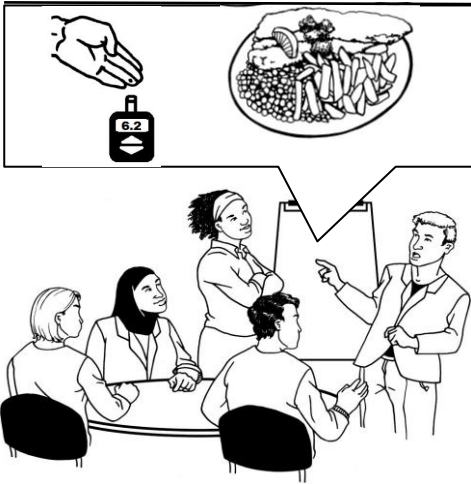


3. Some people need more support to understand and deal with their diabetes, and they need this support whenever they need it.

This support includes those with Type 2 diabetes who may need more help than at first thought.

We said services and health staff need to be ready to support and help people understand and deal with their diabetes, and it must be always be included their care.

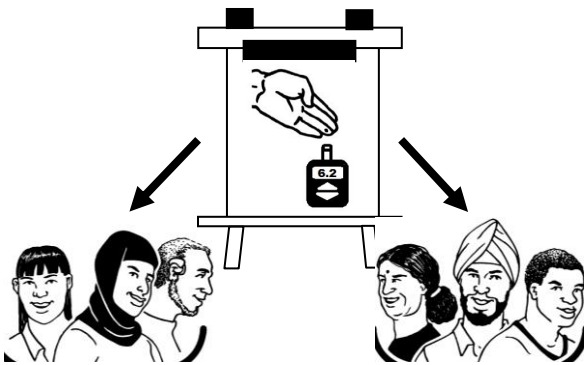




4. People who attended classes to know more about diabetes felt it improved how they can care for their diabetes better.



But the classes did not meet everyone's needs and there were sometimes no other ways for people to know about diabetes if they did not attend.



We said classes need to cater for everyone, including people from different races and people with a learning disability, so they can gain the knowledge and skills they need to care for their diabetes.



Services should also make better use of technology to support people to manage their diabetes through giving information, helping people want to improve, and letting people check how they are doing.





5. People did not always know or understand the results of their yearly diabetes check-ups.



Very few people had a care plan they could take with them as they moved between services.



We said that staff should speak to people to understand their needs and help people put a care plan together with their individual needs.



6. Some staff caring for people with diabetes did not know enough about diabetes and some areas had no diabetes training for staff.

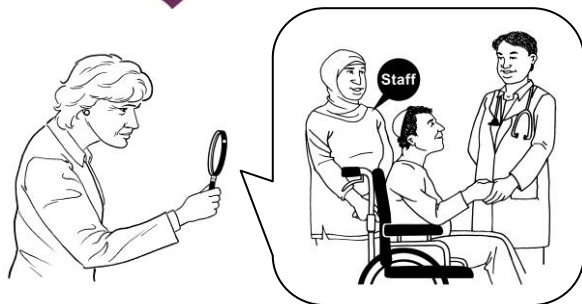


This can badly affect people who need other people to help them look after their diabetes.



We said diabetes training should be given for care workers to help them fully support and care for people with diabetes.

Tell us about your care



When we check GPs and other community services, CQC looks at how illnesses that affect a person for a long time such as diabetes are supported and care for.

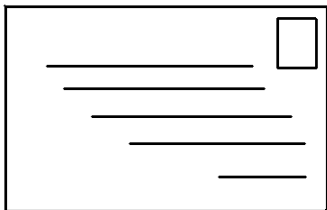


We want to hear about what happened when you receive or have received care.



The information helps us to decide when, where, what to check for and to take action to make sure services improve.

Getting in contact with us



If you would like this report in another format or language, or you would like to tell us something, you can contact us:

Phone: **03000 61 61 61**

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